

09387857

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA	70891	9/8
O.I.P.E. CLASSIFIER		19	9/8/11
FORMALITY REVIEW	CO	710090	9/10

INDEX OF CLAIMS

Rejected N
 Allowed I
 (Through numeral) Canceled A
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 Appeal
 Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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